

---

<b>State:</b>	Arkansas	<b>Filing Company:</b>	AXA Equitable Life Insurance Company
<b>TOI/Sub-TOI:</b>	A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium		
<b>Product Name:</b>	Equivest Series 901 TSA/EDC/401(a)		
<b>Project Name/Number:</b>	Enrollment Forms 10/12/2011 401(a) STRAT (10-12)		

## Filing at a Glance

Company:	AXA Equitable Life Insurance Company
Product Name:	Equivest Series 901 TSA/EDC/401(a)
State:	Arkansas
TOI:	A02.1G Group Annuities - Deferred Non-Variable and Variable
Sub-TOI:	A02.1G.002 Flexible Premium
Filing Type:	Form
Date Submitted:	10/31/2012
SERFF Tr Num:	ELAS-128748198
SERFF Status:	Closed-Approved-Closed
State Tr Num:	
State Status:	Approved-Closed
Co Tr Num:	2011 401(A) STRAT (10-12)
Implementation	12/03/2012
Date Requested:	
Author(s):	Robert Palermo
Reviewer(s):	Linda Bird (primary)
Disposition Date:	11/06/2012
Disposition Status:	Approved-Closed
Implementation Date:	

State Filing Description:

**State:** Arkansas  
**TOI/Sub-TOI:** A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium  
**Product Name:** Equivest Series 901 TSA/EDC/401(a)  
**Project Name/Number:** Enrollment Forms 10/12/2011 401(a) STRAT (10-12)  
**Filing Company:** AXA Equitable Life Insurance Company

## General Information

Project Name: Enrollment Forms 10/12  
Project Number: 2011 401(a) STRAT (10-12)  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Group Market Type: Employer  
Filing Status Changed: 11/06/2012  
State Status Changed: 11/06/2012  
Created By: Robert Palermo  
Corresponding Filing Tracking Number:

Status of Filing in Domicile: Not Filed  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Group  
Group Market Size: Small and Large  
Overall Rate Impact:  
Deemer Date:  
Submitted By: Robert Palermo

Filing Description:

Please see attached filing letter for details.

## Company and Contact

### Filing Contact Information

Gregory Prato, Assistant Vice President  
1290 Avenue of the Americas,  
14th Floor  
New York, NY 10104

greg.prato@axa-equitable.com  
212-314-5710 [Phone]  
212-314-3380 [FAX]

### Filing Company Information

AXA Equitable Life Insurance Company  
1290 Avenue of the Americas, 14-10  
New York,, NY 10104  
(212) 314-2921 ext. [Phone]

CoCode: 62944  
Group Code: 968  
Group Name:  
FEIN Number: 13-5570651

State of Domicile: New York  
Company Type: LIFE Insurance  
State ID Number:

## Filing Fees

Fee Required? Yes  
Fee Amount: \$150.00  
Retaliatory? No  
Fee Explanation: AR Filing fee of \$50.00 per form (3) = \$150.00  
Per Company: No

Company	Amount	Date Processed	Transaction #
AXA Equitable Life Insurance Company	\$150.00	10/31/2012	64429734

<b>SERFF Tracking #:</b>	ELAS-128748198	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	2011 401(A) STRAT (10-12)
<b>State:</b>	Arkansas	<b>Filing Company:</b>	AXA Equitable Life Insurance Company		
<b>TOI/Sub-TOI:</b>	A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium				
<b>Product Name:</b>	Equivest Series 901 TSA/EDC/401(a)				
<b>Project Name/Number:</b>	Enrollment Forms 10/12/2011 401(a) STRAT (10-12)				

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/06/2012	11/06/2012

<b>State:</b>	Arkansas	<b>Filing Company:</b>	AXA Equitable Life Insurance Company
<b>TOI/Sub-TOI:</b>	A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium		
<b>Product Name:</b>	Equivest Series 901 TSA/EDC/401(a)		
<b>Project Name/Number:</b>	Enrollment Forms 10/12/2011 401(a) STRAT (10-12)		

## Disposition

Disposition Date: 11/06/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Variable Text Memorandums		Yes
Supporting Document	Filing Letter		Yes
Form	401(a) Enrollment Form		Yes
Form	457(b) EDC Enrollment Form		Yes
Form	403(b) TSA Enrollment Form		Yes

State: Arkansas

Filing Company:

AXA Equitable Life Insurance Company

TOI/Sub-TOI: A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium

Product Name: Equivest Series 901 TSA/EDC/401(a)

Project Name/Number: Enrollment Forms 10/12/2011 401(a) STRAT (10-12)

## Form Schedule

### Lead Form Number: 2011 401(a) STRAT (10-12)

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data		Readability Score	Attachments
1		401(a) Enrollment Form	2011 401(a) STRAT (10-12)	AEF	Revised	Previous Filing Number:	48029		Enrollment Form - 2011 401(a) STRAT (10-12).pdf
						Replaced Form Number:	2011 401(a) STRAT		
2		457(b) EDC Enrollment Form	2011 EDC STRAT (10-12)	AEF	Revised	Previous Filing Number:	48029		Enrollment Form - 2011 EDC STRAT (10-12).pdf
						Replaced Form Number:	2011 EDC STRAT		
3		403(b) TSA Enrollment Form	2011 TSA STRAT (10-12)	AEF	Revised	Previous Filing Number:	48029		Enrollment Form - 2011 TSA STRAT (10-12).pdf
						Replaced Form Number:	2011 TSA STRAT		

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	Schedule Pages

# AXA Equitable Life Insurance Company

EQUI-VEST® Strategies<sup>SM</sup> (Series 901)  
Combination Fixed and Variable Deferred Annuity  
401(a) Enrollment Form

## Mailing Instructions:

### Express Mail: (with money):

JPMorganChase  
4 Chase Metrotech Center, 7<sup>th</sup> Floor  
NY Remit One Image Lockbox # 13823  
Brooklyn, NY 07188-0823

### Regular Mail: (with money):

EQUI-VEST Unit Annuity  
Lockbox P.O. Box 13823  
Newark, NJ 07188-0463



AXA EQUITABLE

### Express Mail: (without money):

EQUI-VEST New Business  
100 Madison St., Suite 1000  
Syracuse, NY 13202

### Regular Mail: (without money):

EQUI-VEST New Business  
P.O. Box 4704, Syracuse, NY 13221-4704

## 1. Employer information

Employer/and (or) School Name/Unit Name

Unit Number

## 2. Participant information (Check appropriate boxes)

**If your Mailing Address is different from the Primary Residential Address below, please provide your Mailing Address in Section 8. If you have moved within the last 12 months, please indicate your previous address in the Special Instructions section.**

☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other

☐ Male ☐ Female

Social Security Number (Required)

First Name

Middle Initial

Last Name

Birth Date (mm/dd/yy)

Evening Phone Number

Daytime Phone Number

U.S.A. Primary Residential Address — No P.O. Box Permitted

City

State

Zip Code

Email Address (optional)

Vesting Start Date

Date of Hire

Valid Driver's License No./State Issued ID #

State

Exp. Date

U.S. Citizen? ☐ Yes ☐ No (If No, complete below and attach copy of U.S. Visa or Permanent Resident card)

Country

Passport #/Resident Card #

U.S. Visa Type

## 3. Beneficiary(ies) information

### Primary

1. First Name Last Name %

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

## 3. Beneficiary(ies) information (continued)

2. First Name Last Name %

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

### Contingent

1. First Name Last Name %

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

## 4. Optional feature

### Enhanced Death Benefit

If you would like to elect the Enhanced Death Benefit, please check the following box:

☐ Yes, I would like to elect the Enhanced Death Benefit.

## 5. Contribution amount

If a payment will be forwarded at a later date, you must complete #5A and, if applicable, #5B. If a payment will be provided when the enrollment form is signed, complete #5C also.

### A. Expected First Year Contribution (Excluding Direct Transfers/Rollovers):

Expected Monthly Contribution (Check only one)	Expected Annual First Year Contribution
<input type="checkbox"/> \$250	
<input type="checkbox"/> \$500	
<input type="checkbox"/> \$1,000	
<input type="checkbox"/> Other \$	\$

### B. Expected Direct Transfers/Rollover amounts: \$

(i) If you intend to allocate all or a portion of this amount to Special Dollar Cost Averaging, also complete #7.

(ii) Provide a breakdown of employee and employer contributions: \$ \$

Employee Employer

(iii) Is this a Rollover from a 401(k) Plan? ☐ Yes

### C. Amount provided with this enrollment form: \$

### D. Reminder/Contribution Information:

Months to be excluded, if any, from your Plan Contribution Statement (months must be consecutive from May to September only):

## 6. Selection of investment options and allocation percentages

Must check either Box A or Box B, but not both.

- A. ☐ **Maximum Transfer Flexibility.** By checking this box, you may invest in the investment options listed in this section which are not boxed off. Transfers out of the Guaranteed Interest Option will not be limited.
- B. ☐ **Maximum Fund Choice.** By checking this box, you may invest in any of the investment options listed in this section. Transfers out of the Guaranteed Interest Option will be limited (see prospectus for details).

Current Allocation (Applies to Boxes A and B): Select the allocation for the contributions indicated in #5A or any amounts that you may invest in these investment options in the future. You can change this allocation for future contributions at any time. The percentages entered below must be in whole numbers and total 100%.

### Contribution Allocation

#### Structured Investment Option Segment

\_\_\_\_\_ % S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

### Asset Allocation

#### AXA Allocation

- \_\_\_\_\_ % AXA Aggressive Allocation (18\*)  
\_\_\_\_\_ % AXA Balanced Strategy (8Q\*)  
\_\_\_\_\_ % AXA Moderate Allocation (T4\*)  
\_\_\_\_\_ % AXA Moderate Growth Strategy (8O\*)  
\_\_\_\_\_ % AXA Moderate-Plus Allocation (17\*)

#### Target Allocation

- \_\_\_\_\_ % Target 2015 Allocation (6G\*)  
\_\_\_\_\_ % Target 2025 Allocation (6H\*)  
\_\_\_\_\_ % Target 2035 Allocation (6I\*)  
\_\_\_\_\_ % Target 2045 Allocation (6J\*)

#### Other Asset Allocation

- \_\_\_\_\_ % All Asset Growth - Alt 20 (7H\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)  
\_\_\_\_\_ % EQ/Franklin Templeton Allocation (6P\*)

#### Large Cap Stocks

- \_\_\_\_\_ % AXA Tactical Manager 500 (7M\*)  
\_\_\_\_\_ % EQ/BlackRock Basic Value Equity (81\*)  
\_\_\_\_\_ % EQ/Boston Advisors Equity Income (33\*)  
\_\_\_\_\_ % EQ/Calvert Socially Responsible (92\*)  
\_\_\_\_\_ % EQ/Common Stock Index (T1\*)  
\_\_\_\_\_ % EQ/Davis New York Venture (6Q\*)  
\_\_\_\_\_ % EQ/Equity 500 Index (TE\*)  
\_\_\_\_\_ % EQ/Equity Growth PLUS (94\*)  
\_\_\_\_\_ % EQ/JPMorgan Value Opportunities (72\*)  
\_\_\_\_\_ % EQ/Large Cap Core PLUS (85\*)  
\_\_\_\_\_ % EQ/Large Cap Growth Index (82\*)  
\_\_\_\_\_ % EQ/Large Cap Growth PLUS (77\*)  
\_\_\_\_\_ % EQ/Large Cap Value Index (49\*)  
\_\_\_\_\_ % EQ/Large Cap Value PLUS (89\*)  
\_\_\_\_\_ % EQ/Lord Abbett Large Cap Core (05\*)  
\_\_\_\_\_ % EQ/Montag & Caldwell Growth (34\*)  
\_\_\_\_\_ % EQ/Mutual Large Cap Equity (6F\*)  
\_\_\_\_\_ % EQ/T. Rowe Price Growth Stock (32\*)  
\_\_\_\_\_ % EQ/Van Kampen Comstock (07\*)  
\_\_\_\_\_ % Fidelity® VIP Contrafund® (7R\*)  
\_\_\_\_\_ % Fidelity® VIP Equity Income (7S\*)  
\_\_\_\_\_ % Invesco V.I. Diversified Dividend (8B\*)  
\_\_\_\_\_ % MFS® Investors Growth Stock (8I\*)  
\_\_\_\_\_ % MFS® Investors Trust (7P\*)

- \_\_\_\_\_ % Multimanager Aggressive Equity (T2\*)  
\_\_\_\_\_ % Multimanager Large Cap Value (58\*)  
\_\_\_\_\_ % Oppenheimer Main Street Fund®/VA (7Q\*)

#### Small/Mid Cap Stocks

- \_\_\_\_\_ % American Century VP Mid Cap Value (7V\*)  
\_\_\_\_\_ % AXA Tactical Manager 400 (7L\*)  
\_\_\_\_\_ % AXA Tactical Manager 2000 (7K\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Small Cap Growth (TP\*)  
\_\_\_\_\_ % EQ/AXA Franklin Small Cap Value Core (6E\*)  
\_\_\_\_\_ % EQ/GAMCO Small Company Value (37\*)  
\_\_\_\_\_ % EQ/Mid Cap Index (55\*)  
\_\_\_\_\_ % EQ/Mid Cap Value PLUS (79\*)  
\_\_\_\_\_ % EQ/Morgan Stanley Mid Cap Growth (08\*)  
\_\_\_\_\_ % EQ/Small Company Index (97\*)  
\_\_\_\_\_ % Fidelity® VIP Mid Cap (7U\*)  
\_\_\_\_\_ % Goldman Sachs VIT Mid Cap Value (7W\*)  
\_\_\_\_\_ % Invesco V.I. Mid Cap Core Equity (7T\*)  
\_\_\_\_\_ % Invesco V.I. Small Cap Equity (7X\*)  
\_\_\_\_\_ % Ivy Funds VIP Mid Cap Growth (8M\*)  
\_\_\_\_\_ % Ivy Funds VIP Small Cap Growth (7Y\*)  
\_\_\_\_\_ % Multimanager Mid Cap Growth (59\*)  
\_\_\_\_\_ % Multimanager Mid Cap Value (61\*)  
\_\_\_\_\_ % Multimanager Small Cap Growth (36\*)  
\_\_\_\_\_ % Multimanager Small Cap Value (91\*)

#### International Stocks/Global

- \_\_\_\_\_ % AXA Tactical Manager International (7N\*)  
\_\_\_\_\_ % EQ/Global Multi-Sector Equity (78\*)  
\_\_\_\_\_ % EQ/International Core PLUS (88\*)  
\_\_\_\_\_ % EQ/International Equity Index (TN\*)  
\_\_\_\_\_ % EQ/International Value PLUS (73\*)  
\_\_\_\_\_ % EQ/MFS International Growth (26\*)  
\_\_\_\_\_ % EQ/Oppenheimer Global (6A\*)  
\_\_\_\_\_ % EQ/Templeton Global Equity (6D\*)  
\_\_\_\_\_ % Invesco V.I. International Growth (7Z\*)  
\_\_\_\_\_ % Lazard Retirement Emerging Markets Equity (8H\*)  
\_\_\_\_\_ % MFS® International Value (8A\*)  
\_\_\_\_\_ % Multimanager International Equity (65\*)

#### Sector/Specialty

- \_\_\_\_\_ % Invesco V.I. Global Real Estate (8C\*)  
\_\_\_\_\_ % Ivy Funds VIP Energy (8D\*)  
\_\_\_\_\_ % MFS® Technology (8J\*)  
\_\_\_\_\_ % MFS® Utilities (8K\*)  
\_\_\_\_\_ % Multimanager Technology (67\*)  
\_\_\_\_\_ % Van Eck VIP Global Hard Assets (8N\*)

#### Guaranteed-Fixed

- \_\_\_\_\_ % Guaranteed Interest Option (A1\*)

#### AXA Allocation (Not available under Max Flex option)

- \_\_\_\_\_ % AXA Conservative Allocation (15\*)  
\_\_\_\_\_ % AXA Conservative Growth Strategy (8R\*)  
\_\_\_\_\_ % AXA Conservative-Plus Allocation (16\*)  
\_\_\_\_\_ % AXA Conservative Strategy (8S\*)

#### Bonds (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Core Bond Index (96\*)  
\_\_\_\_\_ % EQ/Global Bond PLUS (47\*)  
\_\_\_\_\_ % EQ/Intermediate Government Bond (TI\*)  
\_\_\_\_\_ % EQ/PIMCO Ultra Short Bond (28\*)  
\_\_\_\_\_ % EQ/Quality Bond PLUS (TQ\*)  
\_\_\_\_\_ % Invesco V.I. High Yield (8L\*)  
\_\_\_\_\_ % Ivy Funds VIP High Income (8G\*)  
\_\_\_\_\_ % Multimanager Core Bond (69\*)  
\_\_\_\_\_ % Multimanager Multi-Sector Bond (TH\*)  
\_\_\_\_\_ % Templeton Global Bond Securities (8F\*)

#### Cash Equivalents (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Money Market (T3\*)

#### Sector/Specialty (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Franklin Core Balanced (6C\*)  
\_\_\_\_\_ % PIMCO VIT CommodityRealReturn® Strategy (8E\*)

\_\_\_\_\_ % **Total of all investment options chosen for Contribution Allocations must equal 100%**

\* The number in parentheses is shown for data input only.



## 7. Special Dollar Cost Averaging (Special DCA)

**Only available for direct transfer and rollover contributions.**

Choose one time period. 100% of the contribution indicated in Section #5B(i) will be allocated to Special DCA unless you specify a dollar amount for the time period selected.

- ☐ 3-months: ☐ **100% Allocation or** ☐ \$ \_\_\_\_\_  
☐ 6-months: ☐ **100% Allocation or** ☐ \$ \_\_\_\_\_  
☐ 12-months: ☐ **100% Allocation or** ☐ \$ \_\_\_\_\_

**Use the Special DCA allocation column below for amounts to be transferred under the Special DCA program. You cannot select more than 10 investment options.**

If only allocating a portion of the direct transfer or rollover to Special DCA, you must complete the contribution allocations listed in #6.

**Note:** Your choice of Maximum Transfer Flexibility or Maximum Fund Choice as indicated in #6 will also apply to the investment options listed in this section.

### Special DCA Allocation

#### Structured Investment Option Segment

\_\_\_\_\_ % S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

**Note:** if you elect the Structured Investment Option as part of your allocation percentages in #6 and elected a threshold, the same threshold that you elected will also apply to the Structured Investment Option if chosen as part of your Special DCA allocations.

#### Asset Allocation

##### AXA Allocation

- \_\_\_\_\_ % AXA Aggressive Allocation (18\*)  
\_\_\_\_\_ % AXA Balanced Strategy (8Q\*)  
\_\_\_\_\_ % AXA Moderate Allocation (T4\*)  
\_\_\_\_\_ % AXA Moderate Growth Strategy (8O\*)  
\_\_\_\_\_ % AXA Moderate-Plus Allocation (17\*)

##### Target Allocation

- \_\_\_\_\_ % Target 2015 Allocation (6G\*)  
\_\_\_\_\_ % Target 2025 Allocation (6H\*)  
\_\_\_\_\_ % Target 2035 Allocation (6I\*)  
\_\_\_\_\_ % Target 2045 Allocation (6J\*)

##### Other Asset Allocation

- \_\_\_\_\_ % All Asset Growth - Alt 20 (7H\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)  
\_\_\_\_\_ % EQ/Franklin Templeton Allocation (6P\*)

##### Large Cap Stocks

- \_\_\_\_\_ % AXA Tactical Manager 500 (7M\*)  
\_\_\_\_\_ % EQ/BlackRock Basic Value Equity (81\*)  
\_\_\_\_\_ % EQ/Boston Advisors Equity Income (33\*)  
\_\_\_\_\_ % EQ/Calvert Socially Responsible (92\*)  
\_\_\_\_\_ % EQ/Common Stock Index (T1\*)  
\_\_\_\_\_ % EQ/Davis New York Venture (6Q\*)  
\_\_\_\_\_ % EQ/Equity 500 Index (TE\*)  
\_\_\_\_\_ % EQ/Equity Growth PLUS (94\*)  
\_\_\_\_\_ % EQ/JPMorgan Value Opportunities (72\*)  
\_\_\_\_\_ % EQ/Large Cap Core PLUS (85\*)  
\_\_\_\_\_ % EQ/Large Cap Growth Index (82\*)  
\_\_\_\_\_ % EQ/Large Cap Growth PLUS (77\*)  
\_\_\_\_\_ % EQ/Large Cap Value Index (49\*)  
\_\_\_\_\_ % EQ/Large Cap Value PLUS (89\*)  
\_\_\_\_\_ % EQ/Lord Abbett Large Cap Core (05\*)  
\_\_\_\_\_ % EQ/Montag & Caldwell Growth (34\*)  
\_\_\_\_\_ % EQ/Mutual Large Cap Equity (6F\*)  
\_\_\_\_\_ % EQ/T. Rowe Price Growth Stock (32\*)  
\_\_\_\_\_ % EQ/Van Kampen Comstock (07\*)  
\_\_\_\_\_ % Fidelity® VIP Contrafund® (7R\*)  
\_\_\_\_\_ % Fidelity® VIP Equity Income (7S\*)

- \_\_\_\_\_ % Invesco V.I. Diversified Dividend (8B\*)  
\_\_\_\_\_ % MFS® Investors Growth Stock (8I\*)  
\_\_\_\_\_ % MFS® Investors Trust (7P\*)  
\_\_\_\_\_ % Multimanager Aggressive Equity (T2\*)  
\_\_\_\_\_ % Multimanager Large Cap Value (58\*)  
\_\_\_\_\_ % Oppenheimer Main Street Fund®/VA (7Q\*)

##### Small/Mid Cap Stocks

- \_\_\_\_\_ % American Century VP Mid Cap Value (7V\*)  
\_\_\_\_\_ % AXA Tactical Manager 400 (7L\*)  
\_\_\_\_\_ % AXA Tactical Manager 2000 (7K\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Small Cap Growth (TP\*)  
\_\_\_\_\_ % EQ/AXA Franklin Small Cap Value Core (6E\*)  
\_\_\_\_\_ % EQ/GAMCO Small Company Value (37\*)  
\_\_\_\_\_ % EQ/Mid Cap Index (55\*)  
\_\_\_\_\_ % EQ/Mid Cap Value PLUS (79\*)  
\_\_\_\_\_ % EQ/Morgan Stanley Mid Cap Growth (08\*)  
\_\_\_\_\_ % EQ/Small Company Index (97\*)  
\_\_\_\_\_ % Fidelity® VIP Mid Cap (7U\*)  
\_\_\_\_\_ % Goldman Sachs VIT Mid Cap Value (7W\*)  
\_\_\_\_\_ % Invesco V.I. Mid Cap Core Equity (7T\*)  
\_\_\_\_\_ % Invesco V.I. Small Cap Equity (7X\*)  
\_\_\_\_\_ % Ivy Funds VIP Mid Cap Growth (8M\*)  
\_\_\_\_\_ % Ivy Funds VIP Small Cap Growth (7Y\*)  
\_\_\_\_\_ % Multimanager Mid Cap Growth (59\*)  
\_\_\_\_\_ % Multimanager Mid Cap Value (61\*)  
\_\_\_\_\_ % Multimanager Small Cap Growth (36\*)  
\_\_\_\_\_ % Multimanager Small Cap Value (91\*)

##### International Stocks/Global

- \_\_\_\_\_ % AXA Tactical Manager International (7N\*)  
\_\_\_\_\_ % EQ/Global Multi-Sector Equity (78\*)  
\_\_\_\_\_ % EQ/International Core PLUS (88\*)  
\_\_\_\_\_ % EQ/International Equity Index (TN\*)  
\_\_\_\_\_ % EQ/International Value PLUS (73\*)  
\_\_\_\_\_ % EQ/MFS International Growth (26\*)  
\_\_\_\_\_ % EQ/Oppenheimer Global (6A\*)  
\_\_\_\_\_ % EQ/Templeton Global Equity (6D\*)  
\_\_\_\_\_ % Invesco V.I. International Growth (7Z\*)  
\_\_\_\_\_ % Lazard Retirement Emerging Markets Equity (8H\*)  
\_\_\_\_\_ % MFS® International Value (8A\*)  
\_\_\_\_\_ % Multimanager International Equity (65\*)

##### Sector/Specialty

- \_\_\_\_\_ % Invesco V.I. Global Real Estate (8C\*)  
\_\_\_\_\_ % Ivy Funds VIP Energy (8D\*)  
\_\_\_\_\_ % MFS® Technology (8J\*)  
\_\_\_\_\_ % MFS® Utilities (8K\*)  
\_\_\_\_\_ % Multimanager Technology (67\*)  
\_\_\_\_\_ % Van Eck VIP Global Hard Assets (8N\*)

##### AXA Allocation (Not available under Max Flex option)

- \_\_\_\_\_ % AXA Conservative Allocation (15\*)  
\_\_\_\_\_ % AXA Conservative Growth Strategy (8R\*)  
\_\_\_\_\_ % AXA Conservative-Plus Allocation (16\*)  
\_\_\_\_\_ % AXA Conservative Strategy (8S\*)

##### Bonds (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Core Bond Index (96\*)  
\_\_\_\_\_ % EQ/Global Bond PLUS (47\*)  
\_\_\_\_\_ % EQ/Intermediate Government Bond (TI\*)  
\_\_\_\_\_ % EQ/PIMCO Ultra Short Bond (28\*)  
\_\_\_\_\_ % EQ/Quality Bond PLUS (TQ\*)  
\_\_\_\_\_ % Invesco V.I. High Yield (8L\*)  
\_\_\_\_\_ % Ivy Funds VIP High Income (8G\*)  
\_\_\_\_\_ % Multimanager Core Bond (69\*)  
\_\_\_\_\_ % Multimanager Multi-Sector Bond (TH\*)  
\_\_\_\_\_ % Templeton Global Bond Securities (8F\*)

##### Cash Equivalents (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Money Market (T3\*)

##### Sector/Specialty (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Franklin Core Balanced (6C\*)  
\_\_\_\_\_ % PIMCO VIT CommodityRealReturn® Strategy (8E\*)

\_\_\_\_\_ % **Total of all investment options chosen for Special DCA Allocations must equal 100%**

\* The number in parentheses is shown for data input only.



## 8. Special instructions

Use this section to enter the participant's mailing address if it differs from the primary residential address. Also, for any additional details regarding beneficiary, replacement, or transfer information.

For Participants whose Mailing Address differs from their Primary Residential Address in #2.

Participant's Mailing Address:

Mailing Address — P.O. Box Accepted

City State Zip Code

## 9. Other Required Information (Mandatory)

**A and B must be completed.**

### A. Replacement Information: (Must Respond to 1 and 2.)

**1. Do you have any other existing life insurance or annuities?**

☐ Yes ☐ No

**2. Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction assuming the certificate applied for will be issued?**

☐ Yes ☐ No

If **Yes**, fully complete the following information (if more than 3 companies are replaced, provide details in Special Instructions section):

1. Year Issued Type of Plan Company Contract Number

Company Address

2. Year Issued Type of Plan Company Contract Number

Company Address

3. Year Issued Type of Plan Company Contract Number

Company Address

### B. Certificate State:

The Certificate state is your state of primary residence (Your primary residential address from Section 2) unless you sign the enrollment form in a different state. **If you are signing this enrollment form in a state other than your state of primary residence, check one box below:**

☐ I have a second residence in the state of sale.

☐ I work or conduct business in the state of sale.

If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state.

## 10. Broker Transfer Authorization

☐ **Yes**, by signing this enrollment form, I hereby designate my registered representative named in EQUI-VEST Representative Report to act as my agent in giving investment option transfer instructions by telephone or electronically, and I authorize AXA Equitable to act on such instructions. I understand that AXA Equitable (i) may rely in good faith on the stated identity of a person placing such instructions, and (ii) will have no liability for any claim, loss, liability, or expense that may arise in connection with such instructions. AXA Equitable will continue to act upon this authorization until such time as it receives my written notification of a change at its processing office. AXA Equitable may (i) change or terminate telephone or electronic or overnight mail transfer procedures at any time without prior notice, and (ii) restrict fax, internet, telephone and other electronic transfer services because of disruptive transfer activity.

## 11. Agreement

*All information and statements on this enrollment form are true and complete to the best of my knowledge and belief. I understand that no financial professional has the authority to make or modify any certificate on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights and regulations. I understand that the annuity account value attributable to allocations to the variable investment options of the separate account or variable annuity benefit payments may increase or decrease and are not guaranteed as to dollar amount. I acknowledge that I have received the most current program summary and any supplement(s). After reviewing my financial information and goals with my financial professional, I believe that this certificate will meet my financial goals.*

### Consent for Delivery of Initial Prospectus on CD-ROM:

☐ **Yes**. By checking this box and signing the Enrollment Form below, I acknowledge that I received the initial program summary on computer readable compact disk "CD", and I am able to access the CD information. In order to retain the program summary indefinitely, I understand that I must print it. I also understand that I may request a program summary in paper format at any time by calling Customer Service at 1-877-222-2144 and that all subsequent program summary updates and supplements will be provided to me in paper format, unless I enroll in AXA Equitable's Electronic Delivery Service.

**By signing this Enrollment Form the Participant acknowledges that he or she is buying the certificate for its feature and benefits other than tax deferral, as the tax-deferral feature of the certificate does not provide additional benefits.**

X

Proposed Participant's Signature

Today's Date (mm/dd/yy)

City

State

**Please print in black ink.**

**All questions must be answered.**

- \* "ACTIVE DUTY" MEANS FULL-TIME DUTY IN THE ACTIVE MILITARY SERVICE OF THE UNITED STATES AND INCLUDES MEMBERS OF THE RESERVE COMPONENT (NATIONAL GUARD AND RESERVE) WHILE SERVING UNDER PUBLISHED ORDERS FOR ACTIVE DUTY OR FULL-TIME TRAINING. THE TERM DOES NOT INCLUDE MEMBERS OF THE RESERVE COMPONENT WHO ARE PERFORMING ACTIVE DUTY OR ACTIVE DUTY FOR TRAINING UNDER MILITARY CALLS OR ORDERS SPECIFYING PERIODS OF LESS THAN 31 CALENDAR DAYS.

DATE (mm/dd/yy)

*EQUI-VEST ISSUES MUST ADEQUATELY REFLECT THE COMMISSION INTEREST OF ALL REPRESENTATIVES ON PREVIOUS CONTRACTS.*

[illegible]

\*WHERE REQUIRED BY STATE REGULATIONS

# AXA Equitable Life Insurance Company

**EQUI-VEST® Strategies<sup>SM</sup> (Series 901)**  
Combination Fixed and Variable Deferred Annuity

457(b) EDC Enrollment Form

Application No. \_\_\_\_\_

## Mailing Instructions:

**Express Mail:** (with money):

JPMorganChase  
4 Chase Metrotech Center, 7<sup>th</sup> Floor  
NY Remit One Image Lockbox # 13823  
Brooklyn, NY 07188-0823

**Regular Mail:** (with money):

EQUI-VEST Unit Annuity  
Lockbox P.O. Box 13823  
Newark, NJ 07188-0463



**AXA EQUITABLE**

**Express Mail:** (without money):

EQUI-VEST New Business  
100 Madison St., Suite 1000  
Syracuse, NY 13202

**Regular Mail:** (without money):

EQUI-VEST New Business  
P.O. Box 4704, Syracuse, NY 13221-4704

### 1. Employer information

Employer/and (or) School Name/Unit Name \_\_\_\_\_

Unit Number \_\_\_\_\_

### 2. Participant information (check appropriate boxes)

**If your Mailing Address is different from the Primary Residential Address below, please provide your Mailing Address in Section 8. If you have moved within the last 12 months, please indicate your previous address in the Special Instructions section.**

☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other \_\_\_\_\_

☐ Male ☐ Female

Social Security Number (Required) \_\_\_\_\_

First Name \_\_\_\_\_

Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_

Birth Date (M/D/Y) \_\_\_\_\_

Evening Phone Number \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_

U.S.A. Primary Residential Address – No P.O. Box Permitted

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

Valid Driver's License No./State Issued ID # \_\_\_\_\_

State \_\_\_\_\_

Exp. Date \_\_\_\_\_

U.S. Citizen? ☐ Yes ☐ No (If No, complete below and attach copy of U.S. Visa or Permanent Resident card)

Country \_\_\_\_\_

Passport #/Resident Card # \_\_\_\_\_

U.S. Visa Type \_\_\_\_\_

### 3. Beneficiary(ies) information

#### Primary

1. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other \_\_\_\_\_

T.I.N.: S.S.N. ☐ or E.I.N. ☐ \_\_\_\_\_

### 3. Beneficiary(ies) information (continued)

#### Primary

2. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other \_\_\_\_\_

T.I.N.: S.S.N. ☐ or E.I.N. ☐ \_\_\_\_\_

#### Contingent

1. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

☐ Spouse: Male ☐ Female ☐

☐ Child: Male ☐ Female ☐

☐ Other \_\_\_\_\_

T.I.N.: S.S.N. ☐ or E.I.N. ☐ \_\_\_\_\_

### 4. Optional feature

#### Enhanced Death Benefit

If you would like to elect the Enhanced Death Benefit, please check the following box:

☐ Yes, I would like to elect the Enhanced Death Benefit.

### 5. Contribution amount

If a payment will be forwarded at a later date, you must complete #5A and, if applicable, #5B. If a payment will be provided when the enrollment form is signed, complete #5C also.

#### A. Expected First Year Contribution (Excluding Direct Transfers/Rollovers):

Expected Monthly Contribution (Check only one)	Expected Annual First Year Contribution
<input type="checkbox"/> \$250	
<input type="checkbox"/> \$500	
<input type="checkbox"/> \$1,000	
<input type="checkbox"/> Other \$ _____	\$ _____

#### B. Expected Direct Transfers/Rollover amounts: \$ \_\_\_\_\_

(i) If you intend to allocate all or a portion of this amount to Special Dollar Cost Averaging, also complete #7.

(ii) Provide a breakdown of employee and employer contributions: \$ \_\_\_\_\_ \$ \_\_\_\_\_

Employee Employer

(iii) Is this a Rollover from a 401(k) Plan? ☐ Yes

C. Amount provided with this enrollment form: \$ \_\_\_\_\_

#### D. Reminder/Contribution Information:

Months to be excluded, if any, from your Plan Contribution Statement (months must be consecutive from May to September only): \_\_\_\_\_

## 6. Selection of investment options and allocation percentages

Must check either Box A or Box B, but not both.

- A. ☐ **Maximum Transfer Flexibility.** By checking this box, you may invest in the investment options listed in this section which are not boxed off. Transfers out of the Guaranteed Interest Option will not be limited.
- B. ☐ **Maximum Fund Choice.** By checking this box, you may invest in any of the investment options listed in this section. Transfers out of the Guaranteed Interest Option will be limited (see prospectus for details).

Current Allocation (Applies to Boxes A and B): Select the allocation for the contributions indicated in #5A or any amounts that you may invest in these investment options in the future. You can change this allocation for future contributions at any time. The percentages entered below must be in whole numbers and total 100%.

### Contribution Allocation

#### Structured Investment Option Segment

☐ S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

### Asset Allocation

#### AXA Allocation

- ☐ AXA Aggressive Allocation (18\*)  
☐ AXA Balanced Strategy (8Q\*)  
☐ AXA Moderate Allocation (T4\*)  
☐ AXA Moderate Growth Strategy (8O\*)  
☐ AXA Moderate-Plus Allocation (17\*)

#### Target Allocation

- ☐ Target 2015 Allocation (6G\*)  
☐ Target 2025 Allocation (6H\*)  
☐ Target 2035 Allocation (6I\*)  
☐ Target 2045 Allocation (6J\*)

#### Other Asset Allocation

- ☐ All Asset Growth - Alt 20 (7H\*)  
☐ EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)  
☐ EQ/Franklin Templeton Allocation (6P\*)

#### Large Cap Stocks

- ☐ AXA Tactical Manager 500 (7M\*)  
☐ EQ/BlackRock Basic Value Equity (81\*)  
☐ EQ/Boston Advisors Equity Income (33\*)  
☐ EQ/Calvert Socially Responsible (92\*)  
☐ EQ/Common Stock Index (T1\*)  
☐ EQ/Davis New York Venture (6Q\*)  
☐ EQ/Equity 500 Index (TE\*)  
☐ EQ/Equity Growth PLUS (94\*)  
☐ EQ/JPMorgan Value Opportunities (72\*)  
☐ EQ/Large Cap Core PLUS (85\*)  
☐ EQ/Large Cap Growth Index (82\*)  
☐ EQ/Large Cap Growth PLUS (77\*)  
☐ EQ/Large Cap Value Index (49\*)  
☐ EQ/Large Cap Value PLUS (89\*)  
☐ EQ/Lord Abbett Large Cap Core (05\*)  
☐ EQ/Montag & Caldwell Growth (34\*)  
☐ EQ/Mutual Large Cap Equity (6F\*)  
☐ EQ/T. Rowe Price Growth Stock (32\*)  
☐ EQ/Van Kampen Comstock (07\*)  
☐ Fidelity® VIP Contrafund® (7R\*)  
☐ Fidelity® VIP Equity Income (7S\*)  
☐ Invesco V.I. Diversified Dividend (8B\*)  
☐ MFS® Investors Growth Stock (8I\*)  
☐ MFS® Investors Trust (7P\*)  
☐ Multimanager Aggressive Equity (T2\*)

- ☐ Multimanager Large Cap Value (58\*)  
☐ Oppenheimer Main Street Fund®/VA (7Q\*)

#### Small/Mid Cap Stocks

- ☐ American Century VP Mid Cap Value (7V\*)  
☐ AXA Tactical Manager 400 (7L\*)  
☐ AXA Tactical Manager 2000 (7K\*)  
☐ EQ/AllianceBernstein Small Cap Growth (TP\*)  
☐ EQ/AXA Franklin Small Cap Value Core (6E\*)  
☐ EQ/GAMCO Small Company Value (37\*)  
☐ EQ/Mid Cap Index (55\*)  
☐ EQ/Mid Cap Value PLUS (79\*)  
☐ EQ/Morgan Stanley Mid Cap Growth (08\*)  
☐ EQ/Small Company Index (97\*)  
☐ Fidelity® VIP Mid Cap (7U\*)  
☐ Goldman Sachs VIT Mid Cap Value (7W\*)  
☐ Invesco V.I. Mid Cap Core Equity (7T\*)  
☐ Invesco V.I. Small Cap Equity (7X\*)  
☐ Ivy Funds VIP Mid Cap Growth (8M\*)  
☐ Ivy Funds VIP Small Cap Growth (7Y\*)  
☐ Multimanager Mid Cap Growth (59\*)  
☐ Multimanager Mid Cap Value (61\*)  
☐ Multimanager Small Cap Growth (36\*)  
☐ Multimanager Small Cap Value (91\*)

#### International Stocks/Global

- ☐ AXA Tactical Manager International (7N\*)  
☐ EQ/Global Multi-Sector Equity (78\*)  
☐ EQ/International Core PLUS (88\*)  
☐ EQ/International Equity Index (TN\*)  
☐ EQ/International Value PLUS (73\*)  
☐ EQ/MFS International Growth (26\*)  
☐ EQ/Oppenheimer Global (6A\*)  
☐ EQ/Templeton Global Equity (6D\*)  
☐ Invesco V.I. International Growth (7Z\*)  
☐ Lazard Retirement Emerging Markets Equity (8H\*)  
☐ MFS® International Value (8A\*)  
☐ Multimanager International Equity (65\*)

#### Sector/Specialty

- ☐ Invesco V.I. Global Real Estate (8C\*)  
☐ Ivy Funds VIP Energy (8D\*)  
☐ MFS® Technology (8J\*)  
☐ MFS® Utilities (8K\*)  
☐ Multimanager Technology (67\*)  
☐ Van Eck VIP Global Hard Assets (8N\*)

#### Guaranteed-Fixed

- ☐ Guaranteed Interest Option (A1\*)

#### AXA Allocation (Not available under Max Flex option)

- ☐ AXA Conservative Allocation (15\*)  
☐ AXA Conservative Growth Strategy (8R\*)  
☐ AXA Conservative-Plus Allocation (16\*)  
☐ AXA Conservative Strategy (8S\*)

#### Bonds (Not available under Max Flex option)

- ☐ EQ/Core Bond Index (96\*)  
☐ EQ/Global Bond PLUS (47\*)  
☐ EQ/Intermediate Government Bond (T1\*)  
☐ EQ/PIMCO Ultra Short Bond (28\*)  
☐ EQ/Quality Bond PLUS (TQ\*)  
☐ Invesco V.I. High Yield (8L\*)  
☐ Ivy Funds VIP High Income (8G\*)  
☐ Multimanager Core Bond (69\*)  
☐ Multimanager Multi-Sector Bond (TH\*)  
☐ Templeton Global Bond Securities (8F\*)

#### Cash Equivalents (Not available under Max Flex option)

- ☐ EQ/Money Market (T3\*)

#### Sector/Specialty (Not available under Max Flex option)

- ☐ EQ/Franklin Core Balanced (6C\*)  
☐ PIMCO VIT CommodityRealReturn® Strategy (8E\*)

**Total of all investment options chosen for Contribution Allocations must equal 100%.**

\* The number in parentheses is shown for data input only.



## 7. Special Dollar Cost Averaging (Special DCA)

### Only available for direct transfer and rollover contributions.

Choose one time period. 100% of the contribution indicated in Section #5B(i) will be allocated to Special DCA unless you specify a dollar amount for the time period selected.

- ☐ 3-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_
- ☐ 6-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_
- ☐ 12-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_

Use the Special DCA allocation column below for amounts to be transferred under the Special DCA program. You cannot select more than 10 investment options.

If only allocating a portion of the direct transfer or rollover to Special DCA, you must complete the contribution allocations listed in #6.

**Note:** Your choice of Maximum Transfer Flexibility or Maximum Fund Choice as indicated in #6 will also apply to the investment options listed in this section.

### Special DCA Allocation

#### Structured Investment Option Segment

\_\_\_\_\_ % S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

**Note:** if you elect the Structured Investment Option as part of your allocation percentages in #6 and elected a threshold, the same threshold that you elected will also apply to the Structured Investment Option if chosen as part of your Special DCA allocations.

### Asset Allocation

#### AXA Allocation

- \_\_\_\_\_ % AXA Aggressive Allocation (18\*)
- \_\_\_\_\_ % AXA Balanced Strategy (8Q\*)
- \_\_\_\_\_ % AXA Moderate Allocation (T4\*)
- \_\_\_\_\_ % AXA Moderate Growth Strategy (8O\*)
- \_\_\_\_\_ % AXA Moderate-Plus Allocation (17\*)

#### Target Allocation

- \_\_\_\_\_ % Target 2015 Allocation (6G\*)
- \_\_\_\_\_ % Target 2025 Allocation (6H\*)
- \_\_\_\_\_ % Target 2035 Allocation (6I\*)
- \_\_\_\_\_ % Target 2045 Allocation (6J\*)

#### Other Asset Allocation

- \_\_\_\_\_ % All Asset Growth - Alt 20 (7H\*)
- \_\_\_\_\_ % EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)
- \_\_\_\_\_ % EQ/Franklin Templeton Allocation (6P\*)

#### Large Cap Stocks

- \_\_\_\_\_ % AXA Tactical Manager 500 (7M\*)
- \_\_\_\_\_ % EQ/BlackRock Basic Value Equity (81\*)
- \_\_\_\_\_ % EQ/Boston Advisors Equity Income (33\*)
- \_\_\_\_\_ % EQ/Calvert Socially Responsible (92\*)
- \_\_\_\_\_ % EQ/Common Stock Index (T1\*)
- \_\_\_\_\_ % EQ/Davis New York Venture (6Q\*)
- \_\_\_\_\_ % EQ/Equity 500 Index (TE\*)
- \_\_\_\_\_ % EQ/Equity Growth PLUS (94\*)
- \_\_\_\_\_ % EQ/JPMorgan Value Opportunities (72\*)
- \_\_\_\_\_ % EQ/Large Cap Core PLUS (85\*)
- \_\_\_\_\_ % EQ/Large Cap Growth Index (82\*)
- \_\_\_\_\_ % EQ/Large Cap Growth PLUS (77\*)
- \_\_\_\_\_ % EQ/Large Cap Value Index (49\*)
- \_\_\_\_\_ % EQ/Large Cap Value PLUS (89\*)
- \_\_\_\_\_ % EQ/Lord Abbett Large Cap Core (05\*)
- \_\_\_\_\_ % EQ/Montag & Caldwell Growth (34\*)
- \_\_\_\_\_ % EQ/Mutual Large Cap Equity (6F\*)
- \_\_\_\_\_ % EQ/T. Rowe Price Growth Stock (32\*)
- \_\_\_\_\_ % EQ/Van Kampen Comstock (07\*)
- \_\_\_\_\_ % Fidelity® VIP Contrafund® (7R\*)
- \_\_\_\_\_ % Fidelity® VIP Equity Income (7S\*)
- \_\_\_\_\_ % Invesco V.I. Diversified Dividend (8B\*)

- \_\_\_\_\_ % MFS® Investors Growth Stock (8I\*)
- \_\_\_\_\_ % MFS® Investors Trust (7P\*)
- \_\_\_\_\_ % Multimanager Aggressive Equity (T2\*)
- \_\_\_\_\_ % Multimanager Large Cap Value (58\*)
- \_\_\_\_\_ % Oppenheimer Main Street Fund®/VA (7Q\*)

#### Small/Mid Cap Stocks

- \_\_\_\_\_ % American Century VP Mid Cap Value (7V\*)
- \_\_\_\_\_ % AXA Tactical Manager 400 (7L\*)
- \_\_\_\_\_ % AXA Tactical Manager 2000 (7K\*)
- \_\_\_\_\_ % EQ/AllianceBernstein Small Cap Growth (TP\*)
- \_\_\_\_\_ % EQ/AXA Franklin Small Cap Value Core (6E\*)
- \_\_\_\_\_ % EQ/GAMCO Small Company Value (37\*)
- \_\_\_\_\_ % EQ/Mid Cap Index (55\*)
- \_\_\_\_\_ % EQ/Mid Cap Value PLUS (79\*)
- \_\_\_\_\_ % EQ/Morgan Stanley Mid Cap Growth (08\*)
- \_\_\_\_\_ % EQ/Small Company Index (97\*)
- \_\_\_\_\_ % Fidelity® VIP Mid Cap (7U\*)
- \_\_\_\_\_ % Goldman Sachs VIT Mid Cap Value (7W\*)
- \_\_\_\_\_ % Invesco V.I. Mid Cap Core Equity (7T\*)
- \_\_\_\_\_ % Invesco V.I. Small Cap Equity (7X\*)
- \_\_\_\_\_ % Ivy Funds VIP Mid Cap Growth (8M\*)
- \_\_\_\_\_ % Ivy Funds VIP Small Cap Growth (7Y\*)
- \_\_\_\_\_ % Multimanager Mid Cap Growth (59\*)
- \_\_\_\_\_ % Multimanager Mid Cap Value (61\*)
- \_\_\_\_\_ % Multimanager Small Cap Growth (36\*)
- \_\_\_\_\_ % Multimanager Small Cap Value (91\*)

#### International Stocks/Global

- \_\_\_\_\_ % AXA Tactical Manager International (7N\*)
- \_\_\_\_\_ % EQ/Global Multi-Sector Equity (78\*)
- \_\_\_\_\_ % EQ/International Core PLUS (88\*)
- \_\_\_\_\_ % EQ/International Equity Index (TN\*)
- \_\_\_\_\_ % EQ/International Value PLUS (73\*)
- \_\_\_\_\_ % EQ/MFS International Growth (26\*)
- \_\_\_\_\_ % EQ/Oppenheimer Global (6A\*)
- \_\_\_\_\_ % EQ/Templeton Global Equity (6D\*)
- \_\_\_\_\_ % Invesco V.I. International Growth (7Z\*)
- \_\_\_\_\_ % Lazard Retirement Emerging Markets Equity (8H\*)
- \_\_\_\_\_ % MFS® International Value (8A\*)
- \_\_\_\_\_ % Multimanager International Equity (65\*)

#### Sector/Specialty

- \_\_\_\_\_ % Invesco V.I. Global Real Estate (8C\*)
- \_\_\_\_\_ % Ivy Funds VIP Energy (8D\*)
- \_\_\_\_\_ % MFS® Technology (8J\*)
- \_\_\_\_\_ % MFS® Utilities (8K\*)
- \_\_\_\_\_ % Multimanager Technology (67\*)
- \_\_\_\_\_ % Van Eck VIP Global Hard Assets (8N\*)

#### AXA Allocation (Not available under Max Flex option)

- \_\_\_\_\_ % AXA Conservative Allocation (15\*)
- \_\_\_\_\_ % AXA Conservative Growth Strategy (8R\*)
- \_\_\_\_\_ % AXA Conservative-Plus Allocation (16\*)
- \_\_\_\_\_ % AXA Conservative Strategy (8S\*)

#### Bonds (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Core Bond Index (96\*)
- \_\_\_\_\_ % EQ/Global Bond PLUS (47\*)
- \_\_\_\_\_ % EQ/Intermediate Government Bond (TI\*)
- \_\_\_\_\_ % EQ/PIMCO Ultra Short Bond (28\*)
- \_\_\_\_\_ % EQ/Quality Bond PLUS (TQ\*)
- \_\_\_\_\_ % Invesco V.I. High Yield (8L\*)
- \_\_\_\_\_ % Ivy Funds VIP High Income (8G\*)
- \_\_\_\_\_ % Multimanager Core Bond (69\*)
- \_\_\_\_\_ % Multimanager Multi-Sector Bond (TH\*)
- \_\_\_\_\_ % Templeton Global Bond Securities (8F\*)

#### Cash Equivalents (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Money Market (T3\*)

#### Sector/Specialty (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Franklin Core Balanced (6C\*)
- \_\_\_\_\_ % PIMCO VIT CommodityRealReturn® Strategy (8E\*)

\_\_\_\_\_ % Total of all investment options chosen for Contribution Allocations must equal 100%

\* The number in parentheses is shown for data input only.



## 8. Special instructions

Use this section to enter the participant's mailing address if it differs from the primary residential address. Also, for any additional details regarding beneficiary, replacement, or transfer information.

For Participants whose Mailing Address differs from their Primary Residential Address in #2.

Participant's Mailing Address:

Mailing Address — P.O. Box Accepted

City State Zip Code

## 9. Other Required Information (Mandatory)

**A and B must be completed.**

### A. Replacement Information: (Must Respond to 1 and 2.)

#### 1. Do you have any other existing life insurance or annuities?

☐ Yes ☐ No

#### 2. Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction assuming the certificate applied for will be issued?

☐ Yes ☐ No

If **Yes**, fully complete the following information (if more than 3 companies are replaced, provide details in Special Instructions section):

1. Year Issued Type of Plan Company Contract Number

Company Address

2. Year Issued Type of Plan Company Contract Number

Company Address

3. Year Issued Type of Plan Company Contract Number

Company Address

### B. Certificate State:

The Certificate state is your state of primary residence (Your primary residential address from Section 3) unless you sign the enrollment form in a different state. **If you are signing this enrollment form in a state other than your state of primary residence, check one box below:**

☐ I have a second residence in the state of sale.

☐ I work or conduct business in the state of sale.

If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state.

## 10. Broker Transfer Authorization

☐ **Yes**, by signing this enrollment form, I hereby designate my registered representative named in EQUI-VEST Representative Report to act as my agent in giving investment option transfer instructions by telephone or electronically, and I authorize AXA Equitable to act on such instructions. I understand that AXA Equitable (i) may rely in good faith on the stated identity of a person placing such instructions, and (ii) will have no liability for any claim, loss, liability, or expense that may arise in connection with such instructions. AXA Equitable will continue to act upon this authorization until such time as it receives my written notification of a change at its processing office. AXA Equitable may (i) change or terminate telephone or electronic or overnight mail transfer procedures at any time without prior notice, and (ii) restrict fax, internet, telephone and other electronic transfer services because of disruptive transfer activity.

## 11. Agreement

*All information and statements on this enrollment form are true and complete to the best of my knowledge and belief. I understand that no financial professional has the authority to make or modify any certificate on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights and regulations. I understand that the annuity account value attributable to allocations to the variable investment options of the separate account or variable annuity benefit payments may increase or decrease and are not guaranteed as to dollar amount. I acknowledge that I have received the most current prospectus and any supplement(s). After reviewing my financial information and goals with my financial professional, I believe that this certificate will meet my financial goals.*

### Consent for Delivery of Initial Prospectus on CD-ROM:

☐ **Yes**. By checking this box and signing the Enrollment Form below, I acknowledge that I received the initial prospectus on computer readable compact disk "CD", and I am able to access the CD information. In order to retain the prospectus indefinitely, I understand that I must print it. I also understand that I may request a prospectus in paper format at any time by calling Customer Service at 1-877-222-2144, and that all subsequent prospectus updates and supplements will be provided to me in paper format, unless I enroll in AXA Equitable's Electronic Delivery Service.

***By signing this Enrollment Form the Participant acknowledges that he or she is buying the certificate for its feature and benefits other than tax deferral, as the tax-deferral feature of the certificate does not provide additional benefits.***

X

Proposed Participant's Signature

Today's Date (mm/dd/yy)

City

State

①

**EQUI-VEST®**

**All questions must be answered.**

- A. I CERTIFY THAT A PROSPECTUS AND SUPPLEMENT(S) FOR THE CERTIFICATE HAVE BEEN GIVEN TO THE PROPOSED PARTICIPANT AND THAT NO WRITTEN SALES MATERIALS OTHER THAN THOSE APPROVED BY AXA EQUITABLE HAVE BEEN USED. **(THE REPRESENTATIVE WHO SECURES THIS ENROLLMENT FORM MUST SIGN IN THE SPACE PROVIDED BELOW.)**  
☐ YES
- B. DO YOU HAVE REASON TO BELIEVE THAT ANY LIFE INSURANCE OR ANNUITY HAS BEEN OR WILL BE SURRENDERED, WITHDRAWN FROM, LOANED AGAINST, CHANGED OR OTHERWISE REDUCED IN VALUE, OR REPLACED IN CONNECTION WITH THIS TRANSACTION, ASSUMING THE CERTIFICATE APPLIED FOR WILL BE ISSUED ON THE LIFE OF THE PARTICIPANT?  
☐ YES ☐ NO (IF YES, ATTACH A COPY OF THE REPLACEMENT ACKNOWLEDGEMENT FORM.)
- C. DID YOU (i) VERIFY THE IDENTITY BY REVIEWING THE DRIVER'S LICENSE/PASSPORT OF THE PROPOSED PARTICIPANT, (ii) INQUIRE ABOUT THE SOURCE OF THE CUSTOMER'S ASSETS AND INCOME AND (iii) CONFIRM THAT THE PARTICIPANT IS NOT (NOR IS A FAMILY MEMBER OF OR ASSOCIATED WITH) A FOREIGN MILITARY, GOVERNMENT OR POLITICAL OFFICIAL?  
☐ YES **(IF YOU ARE UNABLE TO ANSWER YES TO ALL THREE QUESTIONS, CONTACT YOUR BRANCH MANAGER.)**
- D. DO YOU AUTHORIZE THE CERTIFICATE TO BE MAILED DIRECTLY TO THE PROPOSED PARTICIPANT INSTEAD OF BEING MAILED TO THE BRANCH OFFICE?  
☐ YES ☐ NO
- E. IS THE PARTICIPANT CURRENTLY AN ACTIVE DUTY\* MEMBER OF THE ARMED FORCES?  
☐ YES ☐ NO (IF YES, YOU MUST ALSO SUBMIT A COMPLETED AND SIGNED LIFE INSURANCE/ANNUITY DISCLOSURE TO ACTIVE DUTY MEMBERS OF THE ARMED FORCES).
- \* "ACTIVE DUTY" MEANS FULL-TIME DUTY IN THE ACTIVE MILITARY SERVICE OF THE UNITED STATES AND INCLUDES MEMBERS OF THE RESERVE COMPONENT (NATIONAL GUARD AND RESERVE) WHILE SERVING UNDER PUBLISHED ORDERS FOR ACTIVE DUTY OR FULL-TIME TRAINING. THE TERM DOES NOT INCLUDE MEMBERS OF THE RESERVE COMPONENT WHO ARE PERFORMING ACTIVE DUTY OR ACTIVE DUTY FOR TRAINING UNDER MILITARY CALLS OR ORDERS SPECIFYING PERIODS OF LESS THAN 31 CALENDAR DAYS.

**NAME AND SIGNATURE OF THE FINANCIAL REPRESENTATIVE WHO ANSWERED THE ABOVE QUESTIONS AND VERIFIED THE ABOVE DOCUMENTS.**

DATE (MM/DD/YY)

*EQUI-VEST ISSUES MUST ADEQUATELY REFLECT THE COMMISSION INTEREST OF ALL REPRESENTATIVES ON PREVIOUS CONTRACTS.*

[illegible]

*\*WHERE REQUIRED BY STATE REGULATIONS*

# AXA Equitable Life Insurance Company

EQUI-VEST® Strategies<sup>SM</sup> (Series 901)  
Combination Fixed and Variable Deferred Annuity  
403(b) TSA Enrollment Form

## Mailing Instructions:

**Express Mail:** (with money):

JPMorganChase  
4 Chase Metrotech Center, 7<sup>th</sup> Floor  
NY Remit One Image Lockbox # 13823  
Brooklyn, NY 07188-0823

**Regular Mail:** (with money):

EQUI-VEST Unit Annuity  
Lockbox P.O. Box 13823  
Newark, NJ 07188-0463



**AXA EQUITABLE**

**Express Mail:** (without money):

EQUI-VEST New Business  
100 Madison St., Suite 1000  
Syracuse, NY 13202

**Regular Mail:** (without money):

EQUI-VEST New Business  
P.O. Box 4704, Syracuse, NY 13221-4704

### 1. EQUI-VEST certificate type (Check one)

- ☐ A. Public Schools  
☐ B. 501(c)(3)  
☐ C. Colleges and Universities

### 2. Employer information

Employer/and (or) School Name/Unit Name

Unit Number

### 3. Participant information (Check appropriate boxes)

**If your Mailing Address is different from the Primary Residential Address below, please provide your Mailing Address in Section 9. If you have moved within the last 12 months, please indicate your previous address in the Special Instructions section.**

☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other

☐ Male ☐ Female

Social Security Number (Required)

First Name

Middle Initial

Last Name

Birth Date (mm/dd/yy)

Evening Phone Number

Daytime Phone Number

U.S.A. Primary Residential Address – No P.O. Box Permitted

City

State

Zip Code

Email Address (optional)

Vesting Start Date

Date of Hire

Valid Driver's License No./State Issued ID #

State

Exp. Date

U.S. Citizen? ☐ Yes ☐ No (If No, complete below and attach copy of U.S. Visa or Permanent Resident card)

Country

Passport #/Resident Card #

U.S. Visa Type

### 4. Beneficiary(ies) information

#### Primary

1. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

- ☐ Spouse: Male ☐ Female ☐  
☐ Child: Male ☐ Female ☐  
☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

### 4. Beneficiary(ies) information (continued)

2. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

- ☐ Spouse: Male ☐ Female ☐  
☐ Child: Male ☐ Female ☐  
☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

### Contingent

1. \_\_\_\_\_ %  
First Name Last Name

Relationship to Participant:

- ☐ Spouse: Male ☐ Female ☐  
☐ Child: Male ☐ Female ☐  
☐ Other:

T.I.N.: S.S.N. ☐ or E.I.N. ☐

### 5. Optional feature Enhanced Death Benefit

If you would like to elect the Enhanced Death Benefit, please check the following box:

☐ Yes, I would like to elect the Enhanced Death Benefit.

### 6. Contribution amount

If a payment will be forwarded at a later date, you must complete #6A and, if applicable, #6B. If a payment will be provided when the enrollment form is signed, complete #6C also.

#### A. Expected First Year Contribution (Excluding Direct Transfers/Rollovers):

Expected Monthly Contribution (Check only one)	Expected Annual First Year Contribution
<input type="checkbox"/> \$250	
<input type="checkbox"/> \$500	
<input type="checkbox"/> \$1,000	
<input type="checkbox"/> Other \$	\$

#### B. Expected Direct Transfers/Rollover amounts: \$

(i) If you intend to allocate all or a portion of this amount to Special Dollar Cost Averaging, also complete #8.

(ii) Provide a breakdown of employee and employer contributions: \$ \$

Employee Employer

(iii) Is this a Rollover from a 401(k) Plan? ☐ Yes

#### C. Amount provided with this enrollment form: \$

#### D. Reminder/Contribution Information:

Months to be excluded, if any, from your Plan Contribution Statement (months must be consecutive from May to September only):



## 7. Selection of investment options and allocation percentages

Must check either Box A or Box B, but not both.

- A. ☐ **Maximum Transfer Flexibility.** By checking this box, you may invest in the investment options listed in this section which are not boxed off. Transfers out of the Guaranteed Interest Option will not be limited.
- B. ☐ **Maximum Fund Choice.** By checking this box, you may invest in any of the investment options listed in this section. Transfers out of the Guaranteed Interest Option will be limited (see prospectus for details).

Current Allocation (Applies to Boxes A and B): Select the allocation for the contributions indicated in #6A or any amounts that you may invest in these investment options in the future. You can change this allocation for future contributions at any time. The percentages entered below must be in whole numbers and total 100%.

### Contribution Allocation

#### Structured Investment Option Segment

☐ % S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

#### Asset Allocation

##### AXA Allocation

- ☐ % AXA Aggressive Allocation (18\*)  
☐ % AXA Balanced Strategy (8Q\*)  
☐ % AXA Moderate Allocation (T4\*)  
☐ % AXA Moderate Growth Strategy (8O\*)  
☐ % AXA Moderate-Plus Allocation (17\*)

##### Target Allocation

- ☐ % Target 2015 Allocation (6G\*)  
☐ % Target 2025 Allocation (6H\*)  
☐ % Target 2035 Allocation (6I\*)  
☐ % Target 2045 Allocation (6J\*)

##### Other Asset Allocation

- ☐ % All Asset Growth - Alt 20 (7H\*)  
☐ % EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)  
☐ % EQ/Franklin Templeton Allocation (6P\*)

##### Large Cap Stocks

- ☐ % AXA Tactical Manager 500 (7M\*)  
☐ % EQ/BlackRock Basic Value Equity (81\*)  
☐ % EQ/Boston Advisors Equity Income (33\*)  
☐ % EQ/Calvert Socially Responsible (92\*)  
☐ % EQ/Common Stock Index (T1\*)  
☐ % EQ/Davis New York Venture (6Q\*)  
☐ % EQ/Equity 500 Index (TE\*)  
☐ % EQ/Equity Growth PLUS (94\*)  
☐ % EQ/JPMorgan Value Opportunities (72\*)  
☐ % EQ/Large Cap Core PLUS (85\*)  
☐ % EQ/Large Cap Growth Index (82\*)  
☐ % EQ/Large Cap Growth PLUS (77\*)  
☐ % EQ/Large Cap Value Index (49\*)  
☐ % EQ/Large Cap Value PLUS (89\*)  
☐ % EQ/Lord Abbett Large Cap Core (05\*)  
☐ % EQ/Montag & Caldwell Growth (34\*)  
☐ % EQ/Mutual Large Cap Equity (6F\*)  
☐ % EQ/T. Rowe Price Growth Stock (32\*)  
☐ % EQ/Van Kampen Comstock (07\*)  
☐ % Fidelity® VIP Contrafund® (7R\*)  
☐ % Fidelity® VIP Equity Income (7S\*)  
☐ % Invesco V.I. Diversified Dividend (8B\*)  
☐ % MFS® Investors Growth Stock (8I\*)  
☐ % MFS® Investors Trust (7P\*)  
☐ % Multimanager Aggressive Equity (T2\*)

- ☐ % Multimanager Large Cap Value (58\*)  
☐ % Oppenheimer Main Street Fund®/VA (7Q\*)

##### Small/Mid Cap Stocks

- ☐ % American Century VP Mid Cap Value (7V\*)  
☐ % AXA Tactical Manager 400 (7L\*)  
☐ % AXA Tactical Manager 2000 (7K\*)  
☐ % EQ/AllianceBernstein Small Cap Growth (TP\*)  
☐ % EQ/AXA Franklin Small Cap Value Core (6E\*)  
☐ % EQ/GAMCO Small Company Value (37\*)  
☐ % EQ/Mid Cap Index (55\*)  
☐ % EQ/Mid Cap Value PLUS (79\*)  
☐ % EQ/Morgan Stanley Mid Cap Growth (08\*)  
☐ % EQ/Small Company Index (97\*)  
☐ % Fidelity® VIP Mid Cap (7U\*)  
☐ % Goldman Sachs VIT Mid Cap Value (7W\*)  
☐ % Invesco V.I. Mid Cap Core Equity (7T\*)  
☐ % Invesco V.I. Small Cap Equity (7X\*)  
☐ % Ivy Funds VIP Mid Cap Growth (8M\*)  
☐ % Ivy Funds VIP Small Cap Growth (7Y\*)  
☐ % Multimanager Mid Cap Growth (59\*)  
☐ % Multimanager Mid Cap Value (61\*)  
☐ % Multimanager Small Cap Growth (36\*)  
☐ % Multimanager Small Cap Value (91\*)

##### International Stocks/Global

- ☐ % AXA Tactical Manager International (7N\*)  
☐ % EQ/Global Multi-Sector Equity (78\*)  
☐ % EQ/International Core PLUS (88\*)  
☐ % EQ/International Equity Index (TN\*)  
☐ % EQ/International Value PLUS (73\*)  
☐ % EQ/MFS International Growth (26\*)  
☐ % EQ/Oppenheimer Global (6A\*)  
☐ % EQ/Templeton Global Equity (6D\*)  
☐ % Invesco V.I. International Growth (7Z\*)  
☐ % Lazard Retirement Emerging Markets Equity (8H\*)  
☐ % MFS® International Value (8A\*)  
☐ % Multimanager International Equity (65\*)

##### Sector/Specialty

- ☐ % Invesco V.I. Global Real Estate (8C\*)  
☐ % Ivy Funds VIP Energy (8D\*)  
☐ % MFS® Technology (8J\*)  
☐ % MFS® Utilities (8K\*)  
☐ % Multimanager Technology (67\*)  
☐ % Van Eck VIP Global Hard Assets (8N\*)

##### Guaranteed-Fixed

- ☐ % Guaranteed Interest Option (A1\*)

##### AXA Allocation (Not available under Max Flex option)

- ☐ % AXA Conservative Allocation (15\*)  
☐ % AXA Conservative Growth Strategy (8R\*)  
☐ % AXA Conservative-Plus Allocation (16\*)  
☐ % AXA Conservative Strategy (8S\*)

##### Bonds (Not available under Max Flex option)

- ☐ % EQ/Core Bond Index (96\*)  
☐ % EQ/Global Bond PLUS (47\*)  
☐ % EQ/Intermediate Government Bond (TI\*)  
☐ % EQ/PIMCO Ultra Short Bond (28\*)  
☐ % EQ/Quality Bond PLUS (TQ\*)  
☐ % Invesco V.I. High Yield (8L\*)  
☐ % Ivy Funds VIP High Income (8G\*)  
☐ % Multimanager Core Bond (69\*)  
☐ % Multimanager Multi-Sector Bond (TH\*)  
☐ % Templeton Global Bond Securities (8F\*)

##### Cash Equivalents (Not available under Max Flex option)

- ☐ % EQ/Money Market (T3\*)

##### Sector/Specialty (Not available under Max Flex option)

- ☐ % EQ/Franklin Core Balanced (6C\*)  
☐ % PIMCO VIT CommodityRealReturn® Strategy (8E\*)

☐ % Total of all investment options chosen for Contribution Allocations must equal 100%

\* The number in parentheses is shown for data input only.

## 8. Special Dollar Cost Averaging (Special DCA)

**Only available for direct transfer and rollover contributions.**

Choose one time period. 100% of the contribution indicated in Section #6B(i) will be allocated to Special DCA unless you specify a dollar amount for the time period selected.

- ☐ 3-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_  
☐ 6-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_  
☐ 12-months: ☐ 100% Allocation or ☐ \$ \_\_\_\_\_

**Use the Special DCA allocation column below for amounts to be transferred under the Special DCA program. You cannot select more than 10 investment options.**

If only allocating a portion of the direct transfer or rollover to Special DCA, you must complete the contribution allocations listed in #7.

**Note:** Your choice of Maximum Transfer Flexibility or Maximum Fund Choice as indicated in #7 will also apply to the investment options listed in this section.

### Special DCA Allocation

#### Structured Investment Option Segment

\_\_\_\_\_ % S&P 500 1year -10% Buffer (V1\*)

Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.

☐ I want to choose a Performance Cap Threshold.

**Note:** if you elect the Structured Investment Option as part of your allocation percentages in #7 and elected a threshold, the same threshold that you elected will also apply to the Structured Investment Option if chosen as part of your Special DCA allocations.

#### Asset Allocation

##### AXA Allocation

- \_\_\_\_\_ % AXA Aggressive Allocation (18\*)  
\_\_\_\_\_ % AXA Balanced Strategy (8Q\*)  
\_\_\_\_\_ % AXA Moderate Allocation (T4\*)  
\_\_\_\_\_ % AXA Moderate Growth Strategy (8O\*)  
\_\_\_\_\_ % AXA Moderate-Plus Allocation (17\*)

##### Target Allocation

- \_\_\_\_\_ % Target 2015 Allocation (6G\*)  
\_\_\_\_\_ % Target 2025 Allocation (6H\*)  
\_\_\_\_\_ % Target 2035 Allocation (6I\*)  
\_\_\_\_\_ % Target 2045 Allocation (6J\*)

##### Other Asset Allocation

- \_\_\_\_\_ % All Asset Growth - Alt 20 (7H\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Dynamic Wealth Strategies (8P\*)  
\_\_\_\_\_ % EQ/Franklin Templeton Allocation (6P\*)

#### Large Cap Stocks

- \_\_\_\_\_ % AXA Tactical Manager 500 (7M\*)  
\_\_\_\_\_ % EQ/BlackRock Basic Value Equity (81\*)  
\_\_\_\_\_ % EQ/Boston Advisors Equity Income (33\*)  
\_\_\_\_\_ % EQ/Calvert Socially Responsible (92\*)  
\_\_\_\_\_ % EQ/Common Stock Index (T1\*)  
\_\_\_\_\_ % EQ/Davis New York Venture (6Q\*)  
\_\_\_\_\_ % EQ/Equity 500 Index (TE\*)  
\_\_\_\_\_ % EQ/Equity Growth PLUS (94\*)  
\_\_\_\_\_ % EQ/JPMorgan Value Opportunities (72\*)  
\_\_\_\_\_ % EQ/Large Cap Core PLUS (85\*)  
\_\_\_\_\_ % EQ/Large Cap Growth Index (82\*)  
\_\_\_\_\_ % EQ/Large Cap Growth PLUS (77\*)  
\_\_\_\_\_ % EQ/Large Cap Value Index (49\*)  
\_\_\_\_\_ % EQ/Large Cap Value PLUS (89\*)  
\_\_\_\_\_ % EQ/Lord Abbett Large Cap Core (05\*)  
\_\_\_\_\_ % EQ/Montag & Caldwell Growth (34\*)  
\_\_\_\_\_ % EQ/Mutual Large Cap Equity (6F\*)  
\_\_\_\_\_ % EQ/T. Rowe Price Growth Stock (32\*)  
\_\_\_\_\_ % EQ/Van Kampen Comstock (07\*)  
\_\_\_\_\_ % Fidelity® VIP Contrafund® (7R\*)  
\_\_\_\_\_ % Fidelity® VIP Equity Income (7S\*)  
\_\_\_\_\_ % Invesco V.I. Diversified Dividend (8B\*)

- \_\_\_\_\_ % MFS® Investors Growth Stock (8I\*)  
\_\_\_\_\_ % MFS® Investors Trust (7P\*)  
\_\_\_\_\_ % Multimanager Aggressive Equity (T2\*)  
\_\_\_\_\_ % Multimanager Large Cap Value (58\*)  
\_\_\_\_\_ % Oppenheimer Main Street Fund®/VA (7Q\*)

#### Small/Mid Cap Stocks

- \_\_\_\_\_ % American Century VP Mid Cap Value (7V\*)  
\_\_\_\_\_ % AXA Tactical Manager 400 (7L\*)  
\_\_\_\_\_ % AXA Tactical Manager 2000 (7K\*)  
\_\_\_\_\_ % EQ/AllianceBernstein Small Cap Growth (TP\*)  
\_\_\_\_\_ % EQ/AXA Franklin Small Cap Value Core (6E\*)  
\_\_\_\_\_ % EQ/GAMCO Small Company Value (37\*)  
\_\_\_\_\_ % EQ/Mid Cap Index (55\*)  
\_\_\_\_\_ % EQ/Mid Cap Value PLUS (79\*)  
\_\_\_\_\_ % EQ/Morgan Stanley Mid Cap Growth (08\*)  
\_\_\_\_\_ % EQ/Small Company Index (97\*)  
\_\_\_\_\_ % Fidelity® VIP Mid Cap (7U\*)  
\_\_\_\_\_ % Goldman Sachs VIT Mid Cap Value (7W\*)  
\_\_\_\_\_ % Invesco V.I. Mid Cap Core Equity (7T\*)  
\_\_\_\_\_ % Invesco V.I. Small Cap Equity (7X\*)  
\_\_\_\_\_ % Ivy Funds VIP Mid Cap Growth (8M\*)  
\_\_\_\_\_ % Ivy Funds VIP Small Cap Growth (7Y\*)  
\_\_\_\_\_ % Multimanager Mid Cap Growth (59\*)  
\_\_\_\_\_ % Multimanager Mid Cap Value (61\*)  
\_\_\_\_\_ % Multimanager Small Cap Growth (36\*)  
\_\_\_\_\_ % Multimanager Small Cap Value (91\*)

#### International Stocks/Global

- \_\_\_\_\_ % AXA Tactical Manager International (7N\*)  
\_\_\_\_\_ % EQ/Global Multi-Sector Equity (78\*)  
\_\_\_\_\_ % EQ/International Core PLUS (88\*)  
\_\_\_\_\_ % EQ/International Equity Index (TN\*)  
\_\_\_\_\_ % EQ/International Value PLUS (73\*)  
\_\_\_\_\_ % EQ/MFS International Growth (26\*)  
\_\_\_\_\_ % EQ/Oppenheimer Global (6A\*)  
\_\_\_\_\_ % EQ/Templeton Global Equity (6D\*)  
\_\_\_\_\_ % Invesco V.I. International Growth (7Z\*)  
\_\_\_\_\_ % Lazard Retirement Emerging Markets Equity (8H\*)  
\_\_\_\_\_ % MFS® International Value (8A\*)  
\_\_\_\_\_ % Multimanager International Equity (65\*)

#### Sector/Specialty

- \_\_\_\_\_ % Invesco V.I. Global Real Estate (8C\*)  
\_\_\_\_\_ % Ivy Funds VIP Energy (8D\*)  
\_\_\_\_\_ % MFS® Technology (8J\*)  
\_\_\_\_\_ % MFS® Utilities (8K\*)  
\_\_\_\_\_ % Multimanager Technology (67\*)  
\_\_\_\_\_ % Van Eck VIP Global Hard Assets (8N\*)

#### AXA Allocation (Not available under Max Flex option)

- \_\_\_\_\_ % AXA Conservative Allocation (15\*)  
\_\_\_\_\_ % AXA Conservative Growth Strategy (8R\*)  
\_\_\_\_\_ % AXA Conservative-Plus Allocation (16\*)  
\_\_\_\_\_ % AXA Conservative Strategy (8S\*)

#### Bonds (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Core Bond Index (96\*)  
\_\_\_\_\_ % EQ/Global Bond PLUS (47\*)  
\_\_\_\_\_ % EQ/Intermediate Government Bond (TI\*)  
\_\_\_\_\_ % EQ/PIMCO Ultra Short Bond (28\*)  
\_\_\_\_\_ % EQ/Quality Bond PLUS (TQ\*)  
\_\_\_\_\_ % Invesco V.I. High Yield (8L\*)  
\_\_\_\_\_ % Ivy Funds VIP High Income (8G\*)  
\_\_\_\_\_ % Multimanager Core Bond (69\*)  
\_\_\_\_\_ % Multimanager Multi-Sector Bond (TH\*)  
\_\_\_\_\_ % Templeton Global Bond Securities (8F\*)

#### Cash Equivalents (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Money Market (T3\*)

#### Sector/Specialty (Not available under Max Flex option)

- \_\_\_\_\_ % EQ/Franklin Core Balanced (6C\*)  
\_\_\_\_\_ % PIMCO VIT CommodityRealReturn® Strategy (8E\*)

\_\_\_\_\_ % **Total of all investment options chosen for Special DCA Allocations must equal 100%.**

\* The number in parentheses is shown for data input only.



## 9. Special instructions

Use this section to enter the participant's mailing address if it differs from the primary residential address. Also, for any additional details regarding beneficiary, replacement, or transfer information.

For Participants whose Mailing Address differs from their Primary Residential Address in #3.

Participant's Mailing Address:

Mailing Address — P.O. Box Accepted

City State Zip Code

## 10. Other Required Information (Mandatory)

**A and B must be completed.**

### A. Replacement Information: (Must Respond to 1 and 2.)

1. Do you have any other existing life insurance or annuities?

☐ Yes ☐ No

2. Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction assuming the certificate applied for will be issued?

☐ Yes ☐ No

If **Yes**, fully complete the following information (if more than 3 companies are replaced, provide details in Special Instructions section):

1. Year Issued Type of Plan Company Contract Number

Company Address

2. Year Issued Type of Plan Company Contract Number

Company Address

3. Year Issued Type of Plan Company Contract Number

Company Address

### B. Certificate State:

The Certificate state is your state of primary residence (Your primary residential address from Section 3) unless you sign the enrollment form in a different state. **If you are signing this enrollment form in a state other than your state of primary residence, check one box below:**

☐ I have a second residence in the state of sale.

☐ I work or conduct business in the state of sale.

If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state.

## 11. Broker Transfer Authorization

☐ **Yes**, by signing this enrollment form, I hereby designate my registered representative named in EQUI-VEST Representative Report to act as my agent in giving investment option transfer instructions by telephone or electronically, and I authorize AXA Equitable to act on such instructions. I understand that AXA Equitable (i) may rely in good faith on the stated identity of a person placing such instructions, and (ii) will have no liability for any claim, loss, liability, or expense that may arise in connection with such instructions. AXA Equitable will continue to act upon this authorization until such time as it receives my written notification of a change at its processing office. AXA Equitable may (i) change or terminate telephone or electronic or overnight mail transfer procedures at any time without prior notice, and (ii) restrict fax, internet, telephone and other electronic transfer services because of disruptive transfer activity.

## 12. Agreement

*All information and statements on this enrollment form are true and complete to the best of my knowledge and belief. I understand that no financial professional has the authority to make or modify any certificate on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights and regulations. I understand that the annuity account value attributable to allocations to the variable investment options of the separate account or variable annuity benefit payments may increase or decrease and are not guaranteed as to dollar amount. I acknowledge that I have received the most current prospectus and any supplement(s). After reviewing my financial information and goals with my financial professional, I believe that this certificate will meet my financial goals.*

### Consent for Delivery of Initial Prospectus on CD-ROM:

☐ **Yes**. By checking this box and signing the Enrollment Form below, I acknowledge that I received the initial prospectus on computer readable compact disk "CD", and I am able to access the CD information. In order to retain the prospectus indefinitely, I understand that I must print it. I also understand that I may request a prospectus in paper format at any time by calling Customer Service at 1-877-222-2144, and that all subsequent prospectus updates and supplements will be provided to me in paper format, unless I enroll in AXA Equitable's Electronic Delivery Service.

**By signing this Enrollment Form the Participant acknowledges that he or she is buying the certificate for its feature and benefits other than tax deferral, as the tax-deferral feature of the certificate does not provide additional benefits.**

X

Proposed Participant's Signature

Today's Date (mm/dd/yy)

City

State

①

**All questions must be answered.**

- 12

12

## PRINT NAME \_\_\_\_\_

SIGNATURE

DATE (mm/dd/yy)

[illegible]

12

<b>State:</b>	Arkansas	<b>Filing Company:</b>	AXA Equitable Life Insurance Company
<b>TOI/Sub-TOI:</b>	A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.002 Flexible Premium		
<b>Product Name:</b>	Equivest Series 901 TSA/EDC/401(a)		
<b>Project Name/Number:</b>	Enrollment Forms 10/12/2011 401(a) STRAT (10-12)		

## Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Variable Text Memorandums		
Comments:			
Attachment(s):			
VTM-401a SERIES 901 ADVISOR ENROLLMENT FORM (GENERIC).pdf			
VTM-EDC SERIES 901 ADVISOR ENROLLMENT FORM (GENERIC).pdf			
VTM-TSA SERIES 901 ADVISOR ENROLLMENT FORM (GENERIC).pdf			

		Item Status:	Status Date:
Satisfied - Item:	Filing Letter		
Comments:			
Attachment(s):			
AR EQ 901 Enrollment Forms 10-12 Filing Letter.pdf			

**AXA EQUITABLE LIFE INSURANCE COMPANY**  
**Memorandum of Variable Material**  
**October 29, 2012**

**2011 401(a) STRAT (10-12) - EQUI-VEST Combination Fixed and Variable Deferred Variable Annuity Enrollment Form**

---

The following comments describe the nature and scope of the variable material contained in the form.

1. The marketing name for the product may be revised in the future to reflect product variations.
2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
3. In Section 2, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
4. In Section 5, the "Expected Monthly Contribution" amount may range from \$100 to \$2,000.
5. In Section 6, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from -5% to -50%.
6. In Section 6, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
7. In Section 7 the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.
8. In Section 7, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the

Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –50%.

9. In Section 7, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly
10. In Section 11, the customer service telephone number is subject to change.
11. AXA Equitable may need to add or revise questions or make changes to the Representative Report based on current operational and/or compliance requirements. If that is the case, the bracketed text will not appear.



**AXA EQUITABLE LIFE INSURANCE COMPANY**  
**Memorandum of Variable Material**  
**October 29, 2012**

**2011 EDC STRAT (10-12)- EQUI-VEST Combination Fixed and Variable Deferred Variable Annuity Enrollment Form**

---

The following comments describe the nature and scope of the variable material contained in the form.

1. The marketing name for the product may be revised in the future to reflect product variations.
2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
3. In Section 2, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
4. In Section 5, the "Expected Monthly Contribution" amount may range from \$100 to \$2,000.
5. In Section 6, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from -5% to -50%.
6. In Section 6, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
7. In Section 7 the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.
8. In Section 7, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the

Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from -5% to -50%.

9. In Section 7, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly
10. In Section 11, the customer service telephone number is subject to change.
11. AXA Equitable may need to add or revise questions or make changes to the Representative Report based on current operational and/or compliance requirements. If that is the case, the bracketed text will not appear.

**AXA EQUITABLE LIFE INSURANCE COMPANY**  
**Memorandum of Variable Material**  
**October 29, 2012**

**2011 TSA STRAT (10-12) - EQUI-VEST Combination Fixed and Variable Deferred Variable Annuity Enrollment Form**

---

The following comments describe the nature and scope of the variable material contained in the form.

1. The marketing name for the product may be revised in the future to reflect product variations.
2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
3. In Section 1, the type of EQUI-VEST contract type references the markets (e.g. "Public School", "501(c)(3)" and "Colleges and Universities") may be added or removed to reflect the markets that are offered for new business.
4. In Section 3, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
5. In Section 6, the "Expected Monthly Contribution" amount may range from \$100 to \$2,000.
6. In Section 7, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from -5% to -30%.
7. In Section 7, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
8. In Section 8, the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.

9. In Section 8, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from -5% to -50%.
10. In Section 8, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
11. In Section 12, the customer service telephone number is subject to change.
12. AXA Equitable may need to add or revise questions or make changes to the Representative Report based on current operational and/or compliance requirements. If that is the case, the bracketed text will not appear.

Lisa Comick  
Policy Drafting Manager  
Annuity Product Management & Filing

October 31, 2012

Mr. Jay Bradford, Insurance Commissioner  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock, AR 72201-1904

**RE: AXA Equitable Life Insurance Company**

**NAIC No.: 968-62944**

**FEIN No.: 13-5570651**

**2011 TSA STRAT (10-12)** - EQUI-VEST Strategies (Series 901) Combination Fixed and Variable Deferred Annuity 403(b) TSA Enrollment Form

**2011 EDC STRAT (10-12)** - EQUI-VEST Strategies (Series 901) Combination Fixed and Variable Deferred Annuity 457 (b) EDC Enrollment Form

**2011 401(a) STRAT (10-12)** - EQUI-VEST Strategies (Series 901) Combination Fixed and Variable Deferred Annuity 401(a) Enrollment Form

Dear Mr. Bradford:

We are filing for approval with the Department the above referenced enrollment forms.

**2011 TSA STRAT (10-12)**

Enrollment form 2011 TSA STRAT (10-12) will be used by our Agents in the 403(b) Tax Sheltered Annuity (TSA) market. This enrollment form will replace enrollment form 2011 TSA STRAT; that was approved by the Department on 02/25/2011 under State Tracking No. 48029.

Enrollment form 2011 TSA STRAT (10-12) is similar to enrollment form 2011 TSA STRAT, with the exception that Section 6, "Contribution amount" has been revised to provide a check box for the client to indicate or choose a specific expected monthly Contribution amount. Also, in Section 12, "Agreement" we removed the text and check-off box for the "Electronic Delivery Information".

Upon approval, enrollment form 2011 TSA STRAT (10-12) will be used with Certificate Form No. 2008TSA901-A that was approved by the Department on 12/19/2008 under State Tracking No. 41092.

**2011 EDC STRAT (10-12)**

Enrollment form 2011 EDC STRAT (10-12) will be used by our Agents in the Employee Deferred Compensation (EDC). This enrollment form will replace enrollment form 2011 EDC STRAT; that was approved by the Department on 02/25/2011 under State Tracking No. 48029.

Enrollment form 2011 EDC STRAT (10-12) is similar to enrollment form 2011 EDC STRAT, with the exception that Section 5, "Contribution amount" has been revised to provide a check box for the client to indicate or choose a specific expected monthly Contribution amount. Also, in Section 11, "Agreement" we removed the text and check-off box for the "Electronic Delivery Information".

Upon approval, enrollment form 2011 EDC STRAT (10-12) will be used with Certificate Form No. 2009EDC901-A that was approved by the Department on 06/16/2009 under State Tracking No. 42632.

**2011 401(a) STRAT (10-12)**

Enrollment form 2011 401(a) STRAT (10-12) will be used by our Agents in the 401(a) market. This enrollment form will replace enrollment form 2011 401(a) STRAT; that was approved by the Department on 02/25/2011 under State Tracking No. 48029.

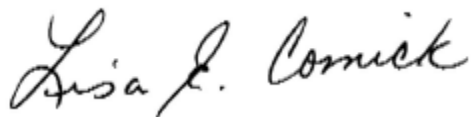
Enrollment form 2011 401(a) STRAT (10-12) is similar to enrollment form 2011 401(a) STRAT, with the exception that Section 5, "Contribution amount" has been revised to provide a check box for the client to indicate or choose a specific expected monthly Contribution amount. Also, in Section 11, "Agreement" we removed the text and check-off box for the "Electronic Delivery Information"

Upon approval, enrollment form 2011 401(a) STRAT (10-12) will be used with Certificate Form No. 2009401a901-A that was approved by the Department on 06/16/2009 under State Tracking No. 42633.

We are also enclosing a Memorandum of Variable Material for each of the enrollment forms.

If you have any questions or need any additional information, please call me at (212) 314-3562 or Greg Prato at (212) 314-5710. Thank you.

Sincerely,

A handwritten signature in black ink that reads "Lisa J. Comick". The signature is written in a cursive, flowing style.

Lisa Comick  
Policy Drafting Manager